



# A Guide to Your 2014-2015 UnitedHealthcare Benefits from Maricopa County

**Look inside to learn about:**

Medical  
Prescription  
Health Savings Accounts  
and more

**[welcometouhc.com/maricopa](http://welcometouhc.com/maricopa)  
1-888-876-7098**



# BEFORE YOU ENROLL



[welcometouhc.com/maricopa](http://welcometouhc.com/maricopa)

## MARICOPA COUNTY IS COMMITTED TO YOUR HEALTH AND WELL-BEING.

### And it starts with your benefits.

Take some time to review this guide to learn about the benefits available from UnitedHealthcare. As you consider your benefits, be sure to ask yourself these important questions:

- Is my doctor in the network?
- Will I be covered if I go outside of the network?
- What will my total costs be, including my plan premiums?
- What additional services are available at no extra cost?

#### Medical plan options

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- **Find a network doctor.**

**Choose with confidence.**

Our UnitedHealth Premium® designation program recognizes physicians for meeting quality and cost-efficiency guidelines.

- **See recommended preventive care services based on your age and gender.**

- **Learn how we can help you make the move from another health plan or network.**

**Your Open Enrollment period is April 14th through May 9th, 2014.** Once the new Plan Year begins, the only time you can make changes to your benefits is if you have a Qualifying Event.

### Thank you for considering UnitedHealthcare

We are proud to have the opportunity to administer your Maricopa County benefit programs. We are committed to giving you access to a positive health care experience. Welcome to UnitedHealthcare.

## ABOUT YOUR MEDICAL PLAN COVERAGE

### Services covered by your medical plan

Here is a summary of the services the plan will cover. See your summary of benefits and coverage for all of the details.

- ▶ Doctor office visits
- ▶ Emergency services
- ▶ Hospital care
- ▶ Mental health and substance abuse services
- ▶ Outpatient care services
- ▶ Pregnancy and newborn care
- ▶ Prescription drugs
- ▶ Preventive care services
- ▶ Rehabilitative services
- ▶ Wellness services



### You have coverage for a wide range of prescriptions.

You have access to 64,000+ retail network pharmacies. If you have mail service, you may save money with a three-month medication supply, which is mailed to you at no additional cost.



### Your preventive care is covered 100% in our network.

You don't have to pay any out-of-pocket costs (co-payment, co-insurance or deductible) for preventive care as long as you use an in-network doctor. Women's preventive health services are also covered, including well-woman visits, gestational diabetes screenings and more.



**Meet the friendly folks of Health Care Lane® and explore how to get the most out of your UnitedHealthcare benefits.**  
**Visit [healthcarelane.com](http://healthcarelane.com)**



Understand  
Health Insurance



Learn about  
your plan



Learn "Why  
UnitedHealthcare"



Learn about  
**[myuhc.com](http://myuhc.com)**



# BENEFITS AT A GLANCE

Medical		
	UnitedHealthcare PPO	UnitedHealthcare HDHP with HSA
	In-Network/Out-of-Network	In-Network/Out-of-Network
<b>Deductible:</b>		
Employee	\$350 / \$700	\$1,250 / \$2,500
Family	\$700 / \$1,400	\$2,500 / \$5,000
		If more than one person is covered under the plan, the family deductible must be met before co-insurance applies.
<b>Out-of-Pocket Maximum</b>		
Employee	\$3,000 / \$6,000	\$2,000 / \$4,000
Family	\$6,000 / \$12,000	\$4,000 / \$8,000
Out-of-pocket maximum includes annual deductible amounts		
<b>Employer HSA Contribution:</b>		
Employee		Up to \$500
Family		Up to \$1,000
<b>Doctors and Specialists:</b>		
Doctor visit	\$40 co-pay / 30%*	10%* / 30%*
Tier 1 Specialist Visit**	\$55 co-pay / Not Applicable	Not Applicable to this plan
Specialist visit	\$70 co-pay / 30%*	10%* / 30%*
<b>Preventive Care</b>		
Well-child visits	No Charge / Not Covered	No Charge / Not Covered
Immunizations	No Charge / Not Covered	No Charge / Not Covered
Annual Physical	No Charge / Not Covered	No Charge / Not Covered
<b>Urgent and Emergency Care</b>		
Urgent care visit	\$75 co-pay / Same as in-network	10%* / Same as in-network
Emergency room	\$200 co-pay / Same as in-network	10%* / Same as in-network
Ambulance	10%* / Same as in-network	10%* / Same as in-network
<b>Hospital Care</b>		
Outpatient surgery	10%* / 30%*	10%* / 30%*
MRI, CT, PET, Nuclear Medicine	\$100 co-pay then 10%* / 30%*	10%* / 30%*
Hospital stay	10%* / 30%*	10%* / 30%*
Pharmacy		
	In-Network/Out-of-Network	In-Network/Out-of-Network
<b>Retail</b>		
Tier 1	Please refer to your Catamaran benefits	30%* / Not Covered
Tier 2		40%* / Not Covered
Tier 3		50%* / Not Covered
<b>Mail Order</b>		
Tier 1	Please refer to your Catamaran benefits.	30%* / Not Covered
Tier 2		40%* / Not Covered
Tier 3		50%* / Not Covered



Only certain Prescription Drug Products are available through mail order. See your benefit plan documents for details.

\*After deductible is satisfied.

\*\*By using a Tier 1 provider, your co-pay for a specialist office visit is lower. Please check [www.welcometouhc.com/maricopa](http://www.welcometouhc.com/maricopa) or [myuhc.com](http://myuhc.com) for a Tier 1 provider near you.

This information is a brief, general description of your coverage; it is not a contract and does not replace your Certificate of Coverage/Summary Plan Description. For a complete list of your coverage, including exclusions and limitations relating to your coverage, please read your Certificate of Coverage/Summary Plan Description. If descriptions, percentages, and dollar amounts conflict with official benefit coverage documents, the official benefits coverage documents prevail.



**A national network to help lower your costs.**

- No matter where you are in the U.S., an in-network doctor is likely nearby.
- Emergency care is covered at the in-network level anywhere in the world.

### UnitedHealthcare PPO

The UnitedHealthcare PPO offered by Maricopa County utilizes the Choice Plus Network of doctors. Remember, if you choose this plan, your pharmacy benefits are provided by Catamaran and mental health and substance abuse services are provided by Magellan.

## PLAN FEATURES

### You can choose any doctor or hospital you want.

You can save money when you choose doctors (including specialists), pharmacies and hospitals in our network.

### You have coverage if you go outside the network.

If you choose to receive care outside the network, you will have a lower level of coverage which means you might have to pay more for the service.

### You do not need to choose a primary care physician.

We do suggest you have a primary care physician to help manage your care.

### You do not need a referral to see a specialist.

See any in-network doctor, including specialists, without referrals.

## HOW THE PLAN WORKS

- 1.** You will pay a **co-pay** for doctor visits and prescriptions.<sup>1</sup> A co-pay is the money you have to pay each time you see a doctor or fill a prescription.
- 2.** You have a **deductible** for some higher cost services like a surgery.<sup>1</sup> The deductible is the amount of money you pay for covered services before your plan starts to pay.
- 3.** If you paid the deductible, your health plan will have **co-insurance**.<sup>1</sup> Co-insurance is when the plan shares the cost of expenses with you. The plan will pay a percentage of each covered service, and you will pay the rest. For example, if the plan pays 90% of the cost, you will pay 10%.
- 4.** You are protected with an **out-of-pocket maximum**. This is the most you will have to pay during the plan year for covered services. If you reach the maximum, the plan will pay 100% of your eligible covered services for the rest of the plan year.

You may be required to receive approval for some services before they can be covered by your plan.

<sup>1</sup> Does not apply for eligible preventive care expenses.



**A national network to help lower your costs.**

- No matter where you are in the U.S., an in-network doctor is likely nearby.
- Emergency care is covered at the in-network level anywhere in the world.

### **Don't leave free money on the table.**

Maricopa County is contributing to the HSA. But you can only get this money by opening your account.

### **Open your HSA with Optum Bank**

More than one million people have chosen Optum Bank as their HSA bank. Optum Bank gives you the convenience of banking through your plan website, **myuhc.com**. Plus, you get:

- Online bill pay
- An HSA debit card



### **How to receive your HSA deposit**

When completing your benefit elections online you may open your health savings account that accompanies this plan at that time. If you are a current JPMorgan Chase account holder, watch for information on transferring your account balances to Optum Bank.



## **PLAN FEATURES**

### **You can choose any doctor or hospital you want.**

You can save money when you choose doctors (including specialists), pharmacies and hospitals in the network.

### **You have coverage if you go outside the network.**

If you choose to receive care outside the network, you will have a lower level of coverage which means you might have to pay more for the service.

### **You do not need to choose a primary care physician.**

We do suggest you have a primary care physician to help manage your care.

### **You do not need a referral to see a specialist.**

See any in-network doctor, including specialists, without referrals.

## **OPEN A HEALTH SAVINGS ACCOUNT (HSA)**

This plan gives you the option of opening a health savings account (HSA) if you are eligible. An HSA is a personal bank account that you own. When you have qualifying medical expenses, including those that apply to your annual deductible, you can choose to pay for them using the money in your HSA. Or, you can save the money for a future need – even into retirement. It's your choice.

### **You own the HSA.**

Any money deposited into your HSA is yours to keep. There is no "use it or lose it" rule. If you leave your employer or change plans, you can take your HSA with you.

### **You will pay less in taxes.**

You won't have to pay federal income tax on:

- ▶ Deposits you or others make to your HSA
- ▶ Money you spend from your HSA on qualified expenses
- ▶ Interest earned on the HSA

*Investments are not FDIC insured, are not guaranteed by Optum Bank and may lose value.*

## HOW THE PLAN WORKS

Remember, you do not need to pay anything out of your pocket for eligible preventive care as it will be covered at 100% when received in the network.

### 1. **Your deductible** – You pay out of pocket until you reach the deductible.

When you have an eligible expense, such as a doctor visit, the entire cost of the visit will apply to your deductible. You will pay the full cost of your health care expenses until you meet your deductible.

You can choose to pay for care from your HSA or you can choose to pay another way (i.e., cash, credit card) and let your HSA grow. It's your money; it's your choice.

### 2. **Your coverage** – Your plan pays a percentage of your expenses.

Once the deductible is met, your health plan has co-insurance. With co-insurance, the plan shares the cost of expenses with you. The plan will pay a percentage of each eligible expense, and you will pay the rest. For example, if the plan pays 90% of the cost, you will pay 10%.

### 3. **Your out-of-pocket maximum** – You are protected from major expenses.

An out-of-pocket maximum protects you from major expenses. The out-of-pocket maximum is the most you will have to pay in the plan year for covered services. The plan will then pay 100% of all remaining covered expenses for the rest of the plan year. Your deductible and co-insurance will apply to your out-of-pocket maximum.



### Paying for prescriptions

The plan has a combined medical and pharmacy deductible. This means the money you pay for covered prescriptions will apply to your deductible. Please note that you will need to pay the actual cost of your prescriptions until you meet the deductible. Remember, you can use the money you save in your HSA.

### 2014 HSA Limits

The IRS limits how much you can deposit into your HSA each year. The 2014 limits are:

- \$3,300 for individual coverage
- \$6,550 for family coverage

### Are You 55 or Older?

You can deposit an extra \$1,000 during the year. This is called a catch-up contribution.

1.

#### Your deductible

You choose to pay out of your pocket OR with your HSA

2.

#### Your coverage

Your plan pays % + You pay %

CO-INSURANCE

3.

#### Your out-of-pocket maximum

You are protected

When you reach your out-of-pocket maximum, the plan pays 100%.

Preventive care is covered at 100% in-network.





### Your Online Tools

**myuhc.com** provides you access to the tools and information you need any time:

- Locate a participating retail pharmacy.
- Look up possible lower-cost medication alternatives.
- Compare medication pricing and options.
- Manage your mail service account.
- Set up email or text message reminders to take medications or order refills.

### What are tiers?

Medications are placed on different “tiers” based on evaluation of their overall value. The images below represent the different cost levels you pay for a medication.

**Tier 1**



**Tier 2**



**Tier 3**



## LEARN MORE ABOUT YOUR PRESCRIPTION BENEFITS

### Network access

- Over 64,000 retail pharmacies in our network.
- Filling prescriptions outside of our network may increase your cost.
- If you take a specialty medication, you must use a designated specialty pharmacy to fill your prescription.
- Specialty pharmacies will also provide educational and clinical support.

### Managing your prescriptions

- The Prescription Drug List (PDL) is a list that places commonly prescribed medications for certain conditions into “tiers.”
- You have access to a wide variety of U.S. Food and Drug Administration (FDA) approved prescriptions.
- You and your doctor should consult the PDL to find lower-cost options that may be available to treat your condition.

### Mail Service Pharmacy

- As part of your pharmacy benefit services, you have access to the OptumRx® Mail Service Pharmacy.
- With mail service you get:
  - **Free Shipping:** Receive up to a 3-month supply of all your maintenance medications plus free standard shipping throughout the United States.
  - **24/7 Access:** Speak to a licensed pharmacist 24 hours a day, 7 days a week.
  - **Helpful Reminders:** Set up text and email reminders to take or refill your medications through **myuhc.com**.



## AFTER YOU ENROLL

# MYUHC.COM<sup>®</sup>



## Take charge

of your health care with myuhc.com

### ESTIMATE

Estimate your health care costs.

### TRACK

Track your claims and expenses.

### SEARCH

Search for in-network doctors.

### RECORD

Safely record and store your family health history.

### IMPROVE

Improve your health with an online health coach.

### WATCH

Watch UHC.TV<sup>SM</sup>, our online television network focused on healthy living.

## Use myuhc.com wherever you are

Download the UnitedHealthcare Health4Me<sup>TM</sup> mobile app

Health4Me provides instant access to your critical health information – anytime and anywhere. Whether you want to find a physician near you, check the status of a claim or speak directly with a health care professional, Health4Me is your go-to resource.

### It's responsive

The Easy Connect feature automatically connects a member with a helpful UnitedHealthcare representative – no waiting on hold.

### It simplifies

myHealthcare Cost Estimator simplifies health options by comparing the costs of various procedures by provider and facility based on a member's specific plan.

### It goes where you go

Uses GPS technology to find a nearby doctor, urgent care or emergency room.

### It's personal

Access a health plan ID card and check on claims. Health4Me delivers personalized information and is absolutely confidential.



# MYUHC.COM<sup>®</sup> TOOLS

## Easily estimate health care costs

**myHealthcare Cost Estimator** makes searching for health care information an easy online shopping experience. Learn the estimated costs of care, including options that may cost less. Just remember the 4Ps.

- ▶ **Procedure.** Search for procedures and treatments and learn about your options.
- ▶ **Provider.** Compare and select providers and facilities based on estimated cost and quality information.
- ▶ **Price.** Quickly estimate costs for specific procedures and treatments.
- ▶ **Place.** Locate providers based on ZIP code, view maps and print directions.

Your estimated total cost (In-Network): **\$649**

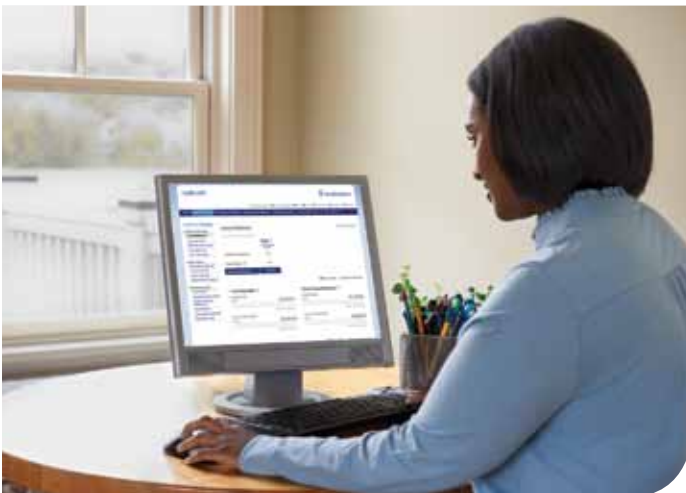
Estimate of what portion your health plan will pay: **\$359**

Your estimated out-of-pocket cost **\$290**

This example is for illustration purposes only.

## Looking for an easier way to manage claims?

**myClaims Manager** provides a clearer explanation of your claims and costs, which helps you better understand and track your health care expenses. You can flag claims you want to watch or follow up on, mark those already paid and add personalized notes to help with record keeping. There are easy-to-read visuals to help you understand your claim and what you may owe and simple explanations of services and treatments you received.



# PERSONAL CARE

### PROGRAMS AND SERVICES TO GIVE YOU PERSONAL SUPPORT WHEN YOU NEED IT

You will have access to services and clinical support across the range of health and wellness goals. From staying healthy and getting healthy to managing a chronic condition, there is a program or service to meet your unique health care needs.

#### If you need to speak with a registered nurse at any time.

With myNurseLine<sup>SM</sup> services, you can call a registered nurse at any time, any day. They can help answer questions like “Can you help me find an in-network doctor?,” “Does my medication have side effects?” and “What are my treatment options?” They can direct you to in-network doctors and even schedule appointments.

Current members can reach myNurseLine by calling **1-800-846-4678**.



#### If you are dealing with the challenges of disease.

Through the Disease Management Program, you will have access to experienced nurses who can provide support for you and your family to deal with conditions or diseases that affect your livelihood.



#### If you are pregnant or thinking about having a baby.

The Healthy Pregnancy Program will help you through every stage of your pregnancy and delivery. You will receive:

- 24-hour access to experienced nurses
- Help to identify risks and special needs
- Money-saving coupons and more

Current members can enroll today by calling **1-888-246-7389** or you can visit **[www.healthy-pregnancy.com](http://www.healthy-pregnancy.com)**.

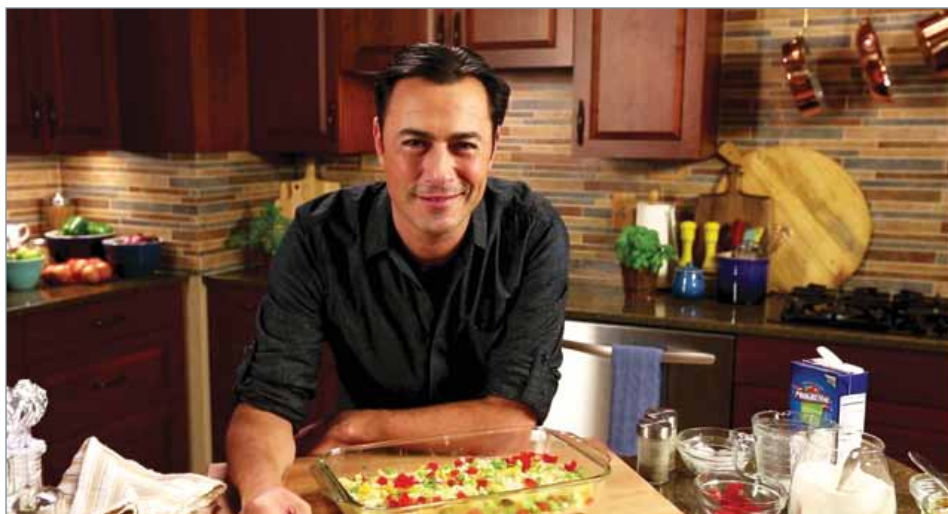


#### Access health tools, calculators and trackers

Through the Health & Wellness tab on myuhc.com, you can access dozens of tools and resources to help you achieve your personal health goals. These tools, trackers and quizzes entertain, motivate and educate while helping you find information fast. As a member, you'll have our:

- **Symptom checker** to find the right care for your symptom
- **Health & Wellness library** to find facts about medications, health conditions and more
- **Health trackers** to record your blood pressure and more to stay on top of a health concern
- **Risk screening quizzes** to check your risk for certain cancers, heart disease and diabetes

# UHC.TV<sup>SM</sup>



## LEARN. LAUGH. BE INSPIRED.

UHC TV is an Internet TV network that inspires people to choose healthier living and educates them to get the most out of their health benefits. From short, original videos with health insurance explanations to tips on healthy eating, seeing your doctor, and living well, it's available anytime from a computer, tablet, or mobile device.

**UHCTV**<sup>SM</sup>  
FOR HEALTH AND HAPPINESS

## WHAT CAN YOU DO AT UHC TV?



### Ask questions

Submit your questions to our cooking, nutrition, and medical experts and view their video answers.



### Unwind with a laugh

Take a stress break and watch a few two-minute comedy bits. It's good for your heart.



### Unravel health insurance mysteries


Get simplified definitions to help you sort out the basics of health insurance. We all need to understand more than we do.

### Share with friends

Share video links by email or embed your favorite videos on your blog or Facebook page. It's great content you can pass along.

 On YouTube at [uhctv](#)

 On Facebook

 On Twitter @UHCTV

Via your computer, tablet or smartphone

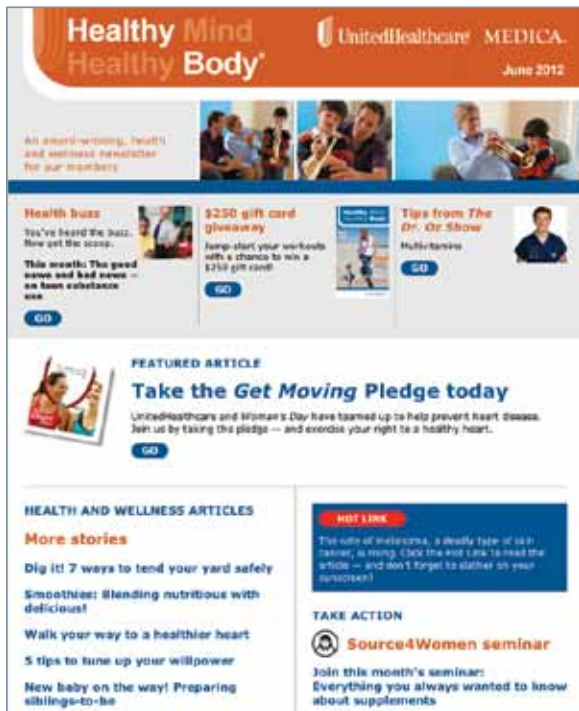


### Stay informed

Subscribe to receive new videos as they are posted so you don't miss a thing.



# HEALTHY MIND HEALTHY BODY/ SOURCE4WOMEN



## SUBSCRIBE TO **HEALTHY MIND HEALTHY BODY®**, YOUR PERSONALIZED HEALTH E-NEWSLETTER.

*Healthy Mind Healthy Body®* is an award-winning newsletter, providing health and medical news that is personalized to your interests. Once you sign up, you can choose the topics that you care about and we email the newsletter to your personal email account each month.

Topic choices include:

- Healthy living
- Fitness, nutrition and weight management
- Family and child health
- Women's and men's health
- Diabetes
- Asthma and more

Help your mind and help your body. Visit [www.uhc.com/myhealthnews](http://www.uhc.com/myhealthnews) to sign up today.

## GET REAL ANSWERS TO HEALTH AND WELLNESS QUESTIONS AT SOURCE4WOMEN.COM.

- **Manage your family's health** – Connect to tools that help you review health claims, create personal health records and locate doctors in your area.
- **Join our online community** – Connect with other women about managing health and wellness for the whole family.
- **Access expert commentary** – Stay up-to-date on the latest health and wellness information via live seminars hosted by leading experts.

 **Follow @Source4Women on Twitter**



# PREVENTIVE CARE

## UNDERSTANDING PREVENTIVE CARE

UnitedHealthcare is dedicated to helping people live healthier lives, and we encourage our members to receive age and gender appropriate preventive health services. UnitedHealthcare covers preventive services, as specified in the health care reform law, at 100% without charging a co-pay, co-insurance or deductible, as long as they are received by a health plan in-network provider. UnitedHealthcare also covers other routine services, which may require a co-pay, co-insurance or deductible. Always refer to your plan documents for your specific coverage.

### What is Preventive Care?

Preventive care focuses on evaluating your current health status when you are symptom free. Preventive care allows you to obtain early diagnosis and treatment, to help avoid more serious health problems. Your preventive care services may include physical examinations, immunizations, laboratory tests and other types of screening tests. During your preventive visit your doctor will determine what tests or health screenings may be right for you based on many factors such as your age, gender, overall health status, personal health history and your current health condition.

### Which health services are NOT considered preventive care?

Medical treatment for specific health issues or conditions, on-going care, laboratory tests or other health screenings necessary to manage or treat an already-identified medical issue or health condition are considered diagnostic care, not preventive care.

### What is the difference between preventive care and diagnostic care?

Certain services can be done for either preventive or diagnostic reasons. When a service is performed specifically for preventive screening, and there are no known symptoms, illnesses, or history, the service will be considered Preventive Care, subject to age, gender and other factors when received by an in-network physician and subject to the person's benefit plan.

Services are considered **Preventive Care** when a person:

- Does not have symptoms or any abnormal studies indicating an abnormality.
- Has had a screening done within the recommended age and gender guidelines with the results being considered normal.
- Has had a diagnostic service with normal results, after which the physician recommends future preventive care screenings using the appropriate age and gender guidelines.

Services are considered **Diagnostic Care**<sup>1</sup> when:

- Services are ordered due to current issues or symptoms(s) that require further diagnosis.
- Abnormal result on a previous preventive or diagnostic screening test requires further diagnostic testing or services.
- Abnormal test results found on a previous preventive or diagnostic service requires the same test be repeated sooner than the normal age and gender guideline recommendations would require.

<sup>1</sup>A diagnostic service is not covered as preventive care, but may be covered under the applicable non-preventive medical benefit, subject to your Benefit Plan provisions.



### Examples of Preventive Care

1. A man visits his primary doctor and has a skin cancer screening as part of his preventive exam.

**Answer:** This is considered preventive care because his visit is part of a routine annual exam and has not been prompted by any sort of previous diagnosis.

2. A woman who takes medicine for high cholesterol has an annual wellness exam and receives a blood test to measure her cholesterol level.

**Answer:** Although the woman is taking cholesterol medicine, the office visit and the blood test are considered preventive care because they are part of her overall wellness exam.

## NOTES



Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc., or their affiliates.

As a company dedicated to helping people to live healthier lives, UnitedHealthcare encourages our enrollees to receive preventive health services. The health care reform law requires the coverage of certain preventive services, based on your age, gender and other health factors, with no cost-sharing. UnitedHealthcare covers preventive services, as specified in the health care reform law, at 100% without charging a copayment, coinsurance or deductible, as long as they are received in the health plan's network. UnitedHealthcare also covers other routine services, which may require a copayment, coinsurance or deductible. Always refer to your plan documents for your specific coverage.

For a complete description of the UnitedHealth Premium® designation program, including details on the methodology used, geographic availability, program limitations and medical specialties participating, please see myuhc.com.

All UnitedHealthcare members can access a cost estimator online tool at myuhc.com. Depending on your specific benefit plan and the ZIP code that is entered, either the myHealthcare Cost Estimator or the Treatment Cost Estimator will be available. A mobile version of myHealthcare Cost Estimator is available in the Health4Me mobile app, and additional ZIP codes and procedures will be added soon. This tool is not intended to be a guarantee of your costs or benefits. Your actual costs and/or benefits may vary. When accessing the tool, please refer to the Terms and Conditions of Use and Why Your Costs May Vary sections for further information regarding cost estimates. Refer to your health plan coverage document for information regarding your specific benefits.

The UnitedHealthcare plan with Health Savings Account (HSA) is a high deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account (HSA) with a bank of their choice or through Optum Bank, Member of FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP.

Source4Women content and materials are for information purposes only, are not intended to be used for diagnosing problems and/or recommending treatment options, and are not a substitute for your doctor's care. Lists of potential treatment options and/or symptoms may not be all inclusive.

Disease Management programs and services may vary on a location-by-location basis and are subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply.

If you select a new provider or are assigned to a provider who does not participate in the Disease Management program, your participation in the program will be terminated. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer.

YouTube is a registered trademark of Google, Inc. Facebook is a registered trademark of Facebook Inc. Twitter is a registered trademark of Twitter, Inc.

The Healthy Pregnancy Program follows national practice standards from the Institute for Clinical Systems Improvement. The Healthy Pregnancy Program cannot diagnose problems or recommend specific treatment. The information provided is not a substitute for your doctor's care.

The myNurseLine<sup>SM</sup>, Care Coordination Nurse, and Cancer Nurse Advocate services are for informational purposes only, and should not be used for emergency or urgent care situations. In an emergency, call 911 or go to the nearest emergency room. Nurses cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care. These services are not an insurance program and may be discontinued at any time. They are included as part of your health plan.

**Information for individuals residing in the state of Louisiana or have policies issued in Louisiana:** Health care services may be provided to you at a network health care facility by facility-based physicians who are not in your health plan. You may be responsible for payment of all or part of these fees for those non-network services, in addition to applicable amounts due for copayments, coinsurance, deductibles, and non-covered services. Specific information about network and non-network facility-based physicians can be found at myuhc.com or by calling the toll-free Customer Care telephone number that appears on the back of your health plan ID card.